

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION			
D.J.P.E. CLASSIFIER			
FORMALITY REVIEW	1001	1001	12-20-00
RESPONSE FORMALITY REVIEW	10015	10015	1-3-01

INDEX OF CLAIMS

- Refused
- Allowed
- (Through numerical) Cancelled
- Restricted

BEST AVAILABLE COPY

A _____ Appeal
D _____ Objected

Claim	ID	Date
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If more than 150 claims or 10 actions
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